

| AMENDMENT TRANSMITTAL LETTER | | | | | | | Docket No. SON-3406 | | | |
|--|--|------------------------------|-----------------------------------|--------------------------|-------------|------------------------------|------------------------|--|--|--|
| Application No. 10/574,941-Conf. #8513 | | Filing Date April 7, 2006 | | Examiner Y. K. Aggarw | | <i>ı</i> al | Art Unit 2622 | | | |
| Applicant(s): Mits | | | | | | | | | | |
| Invention: IMAGE-INFORMATION RECORDING DEVICE AND IMAGE-INFORMATION DISPLAY DEVICE | | | | | | | | | | |
| , ———————————————————————————————————— | TC | THE COMMI | SSIONER FO | OR PAT | ENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | | | | | | |
| The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED | | | | | | | | | | |
| | Claims | Highest | S AS AMENI | JEU | | | | | | |
| | Remaining After Amendment | Number Previously Paid | Number Extra Claims Present | | Rate | | | | | |
| Total Claims | 28 | - 20 = | 8 | х | 52.00 | | 416.00 | | | |
| Independent Claims | 5 | - 8 = | 0 | x | 220.00 | | 0.00 | | | |
| Multiple Depend | lent Claims (ch | eck if applicabl | e) | | | | | | | |
| Other fee (pleas | Other fee (please specify): | | | | | | | | | |
| TOTAL ADDIT | TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | | | | | |
| x Large Entity Small Entity | | | | | | | | | | |
| No additional fee is required for this amendment. | | | | | | | | | | |
| X Please charge Deposit Account No. 18-0013 in the amount of \$ 416.00 . | | | | | | | | | | |
| A check in the amount of \$ to cover the filing fee is enclosed. | | | | | | | | | | |
| Payment by credit card. Form PTO-2038 is attached. | | | | | | | | | | |
| X The Director | r is hereby auth d below. A dup | | • | - | | lo18 | 3-0013 | | | |
| | ny overpaymer | • • | | | | | | | | |
| = $"$ | any additional fil | /) | n processing | fees req | uired under | 37 CFR 1. | 16 and 1.17. | | | |
| | 1 1/2 | | | 1 | Datad: | Novembe | r 1 2010 | | | |
| Christopher M. Attorney/Agent | | | ٠ | ' | Dated: | Novembe | | | | |
| RADER, FISH | / //AN & GRAUE | R PLLC | | | | 941 | | | | |
| 1233 20th Street, N.W. Suite 501 | | | | | | 10574941 | | | | |
| Washington, DC 20036 (202) 955-3750 | | | | | | | | | | |
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PTO/SB/17 (10-08)

Approved for use through 09/30/2010. OMB 0651-0032

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| Effective on 12/08 | Complete if Known | | | | | | | | | |
|---|--------------------------------|------------------------------------|-----------------------|------------------------|------------------|--|--|--|--|--|
| Fees pursuant to the Consolidated Approp | | Application Number 10/574,941-Conf | | | nf. #8513 | | | | | |
| FEE TRANS | MITTAL | Filing Date April 7, 2006 | | | | | | | | |
| For FY 20 | First Named Inven | | Mitsuhiro Hirabayashi | | | | | | | |
| FOI F1 Z | <u> </u> | Examiner Name | Y. | Y. K. Aggarwal | | | | | | |
| Applicant claims small entity star | Art Unit | | 2622 | | | | | | | |
| TOTAL AMOUNT OF PAYMENT | Attorney Docket No. SON-3406 | | | | | | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | | | | | | |
| Deposit Account Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC | | | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | | | |
| x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | | | | |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | | |
| Į F | LING FEES SE Small Entity | EARCH FEES E Small Entity | | TION FEES Small Entity | | | | | | |
| Application Type Fee (| | | Fee (\$) | Fee (\$) | Fees Paid (\$) | | | | | |
| Utility 330 | 165 540 | 270 | 220 | 110 | | | | | | |
| Design 220 | 110 100 | 50 | 140 | 70 | | | | | | |
| Plant 220 | 110 330 | 165 | 170 | 85 | | | | | | |
| Reissue 330 | 165 540 | 270 | 650 | 325 | | | | | | |
| Provisional 220 | 110 | 0 | 0 | 0 | | | | | | |
| 2. EXCESS CLAIM FEES Small Entity | | | | | | | | | | |
| Fee Description | | | <u>Fee (</u> \$ | 5) Fee (\$) 26 | | | | | | |
| Each claim over 20 (including Reis | • | | - | | | | | | | |
| Each independent claim over 3 (including Reissues) 220 110 Multiple dependent claims 390 195 | | | | | | | | | | |
| • • | e Eng (\$\ | Fee Paid (\$) | Mul | Itiple Depende | | | | | | |
| Total Claims Extra Claims Fee (\$) F | | | | | ee Paid (\$) | | | | | |
| HP = highest number of total claims paid for | | 110.00 | | 147 <u>-</u> | | | | | | |
| Indep. Claims Extra Claim | ee Paid (\$) | | | | | | | | | |
| 58 or HP =0 | × <u>220.00</u> = | 0.00 | | | | | | | | |
| HP = highest number of independent claim | s paid for, if greater than 3. | | | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 | | | | | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) | | | | | | | | | | |
| - 100 = /50 = (round up to a whole number) x = | | | | | | | | | | |
| 4. OTHER FEE(S) Fees Paid (\$) | | | | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | | | |
| Other (e.g., late filing sur harge): | | | | | | | | | | |
| SUBMITTED BY | | | | | | | | | | |
| Signature | 1/8 | | 40,290/ 47,255 | Telephone | (202) 955-3750 | | | | | |
| Name (Print/Type) Christopher M. I | obin/Brian K Dutton | | | Date N | November 1, 2010 | | | | | |